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To JOE KUBORN	From NORBERT BALKO
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Approved for use through 9/30/00
 mark Office: U.S. DEPARTMENT OF COMMERCE
 et Number 03564 (4828-67)

PROSENY
 (8/96)

DECLARATION:

Declaration OR Declaration
☒ Submitted with Initial Filing ☐ Submitted after Initial Filing

First Named Inventor	Norbert H. Balko
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ELECTRONIC ELECTRICITY METER HAVING CONFIGURABLE CONTACTS

(Title of the invention)

the specification of which
☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT

International Number [] and was amended on (MM/DD/YYYY) []
 (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional Application numbers are listed on a supplemental priority sheet attached hereto.

Type a plus sign (+) inside this box [+]

DECLARATION							
I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365© of any PCT international application designated the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States of PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.							
U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)				
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.							
As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:							
Name	Registration Number	Name	Registration Number				
Daniel D. Fetterley	20,323	Joseph D. Kuborn	40,689				
George H. Solveson	25,927	Jeffrey S. Sokol	35,686				
Gary A. Essmann	29,376	William L. Falk	27,709				
Thomas M. Wozny	28,922	Aaron T. Olejniczak	54,853				
Michael E. Taken	28,120	Peter T. Holsen	54,180				
Joseph J. Jochman, Jr.	25,058						
<input type="checkbox"/> Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.							
Please direct all correspondence to:							
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		26753			<input checked="" type="checkbox"/> Correspondence address below		
NAME	Joseph D. Kuborn (Reg. No. 40,689)						
	ANDRUS, SCEALES, STARKE & SAWALL, LLP						
ADDRESS	100 East Wisconsin Avenue						
	Suite 1100						
CITY	Milwaukee	STATE	Wisconsin	ZIP CODE	53202-4178		
COUNTRY	U.S.A.	TELEPHONE	(414) 271-7590	FAX	(414) 271-5770		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Norbert H. <i>Norbert H. Balko</i>				Balko			
Inventor's Signature	<i>Norbert H. Balko</i>			Date <i>2/3/04</i>			
RESIDENCE: City	Harrison City	State	PA	Country	USA	Citizenship	USA
POST OFFICE ADDRESS		1054 Redoak Drive					
City	Harrison City	State	PA	Zip	15636	Country	USA
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto.							

Please type a plus sign (+) inside this box [+]

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
-------------	--

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jeffery F.		Fye	
Inventor's Signature		Date	
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Citizenship	USA		
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Country	USA		

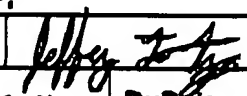
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jeffrey L.		Fischer	
Inventor's Signature		Date	
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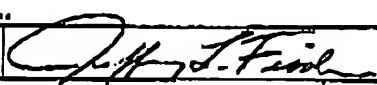
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Matthew E. M.		Storkey	
Inventor's Signature	<i>Matthew Storkey</i>	Date	5 Feb 2004
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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Jeffrey L.		Fischer	
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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